

## Riverside City

## Community Emergency Response Team

## Preparing today for tomorrow's emergencies!



Completion of this form does not constitute enrollment.

You will be contacted for confirmation of enrollment prior to start of the class.

APPLICANT INFORMATION PLEASE PRINT NEATLY								
LAST		LAST	FIRST			M.I.		
NAME								
	ADDRESS							
				ZIP				
	CITY							
HOME PHONE :				CELL PH	ONE :			
WORK PHONE :			E-MAIL:					
_	GANIZATION OR MMUNITY GROUP				Birth date	Month	Day	Year
Felony Convictions Yes* No *Conditional Participation		Must be at least 16 or legal guardian	yrs. old, under	<sup>•</sup> 18 yrs. mu	ıst have sigr	ned conser	nt form fro	om parent
COURSE INFORMATION (Check which session you wish to attend)								
X	SESSION	COURSE TYPE	LOCATION	DATES	S AND TIME	S		
	JAN 2014 CLASS	20-Hour Basic	Riverside Cit Emergency Operations Center	Thurs Tues.	Jan. 14, 20 . Jan. 16, 2 Jan. 21, 2 . Jan. 23, 2 Jan. 25, 2	2014 6:0 2014 6:0 2014 6:0	0 pm – 0 pm – 9 0 pm – 9	9:00 pm 9:00 pm 9:00 pm 9:00 pm 5:00 pm

Class Schedule Subject To Change Without Notice

Sat. March 8, 2014 8:00 am - 5:00 pm

Sun. March 9, 2014 8:00 am - 5:00 pm

March 7, 2014 6:00 pm - 9:00 pm

Do you require special accommodations for a disability? If so, please describe accommodations requested below:



MARCH

**2014 CLASS** 

COURSE FEE: The Course Fee per person is \$15.00 and must accompany your registration. Checks should be made payable to "City of Riverside". Course fee is not refundable.

Riverside City

Emergency

Operations

Center

20-Hour Basic

## MAIL COMPLETED REGISTRATION FORM WITH PAYMENT TO:

City of Riverside Fire Department Office of Emergency Management 3085 St. Lawrence St, Riverside, CA 92504
PHONE (951) 320-8100 FAX (951) 320-8102
Or email: rivcitycert@riversideca.gov

http://www.riversideca.gov/readyriverside/cert/